

Date: October 28, 1996

Permit No. 96-68

# TOWN OF ACTON

## APPLICATION FOR PERMIT TO CONSTRUCT WITHIN A PUBLIC WAY

**This application must be submitted not less than five (5) days prior to any Construction within a public way.**

**Notice 24 hours in advance of any construction must be given to the Town Engineer.**

1. Permittee: Boston GAS Address: 66 R. Comm. Avenue  
1A. Telephone #: 617-369-8171 W. CONCORD MA PO. 1336
2. Location of Proposed Construction: 15 Newtown Rd
3. Purpose of Construction: NEW GAS SERVICE
4. Length of Cut: 3' GAS main might be in shoulder
5. Width of Cut: 2'
6. Width of Existing Pavement: 26'
7. Type of Existing Roadway Surface: Asphalt Type of Curb: —
8. Type of Existing Sidewalk Surface: — Type of Shoulder: —
9. Date of Street Opening: From ASAP To —
10. For Work Involving Excavations: Dig Safe Number 96440628

I, the undersigned, hereby declare that I have read and agree to the Town of Acton Specifications for Regulating Construction with Public Ways dated August 3, 1982. I have deposited the required bond with the Town of Acton, and I covenant and agree that the Town may deduct from this amount the cost of repairs to the road surface, curbs, shoulders, walls or other features within the right-of-way including replacing bounds if not completed by me to the satisfaction of the Town Engineer within the specified time.

Special Instructions:

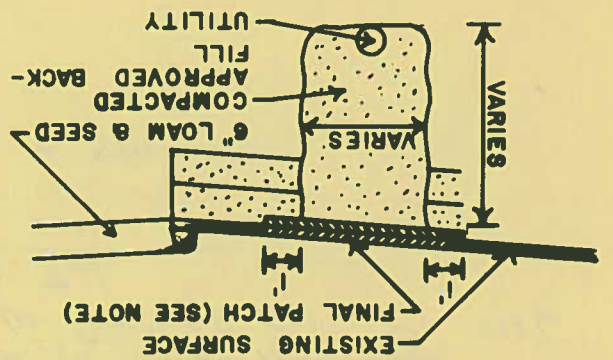
Signature of Applicant: Phil Wells

Permit Issued: Date 10/29/96 By: Dennis R. Ry

Application Denied: Date \_\_\_\_\_ By: \_\_\_\_\_

Work Inspected and Approved: Date \_\_\_\_\_ By: \_\_\_\_\_

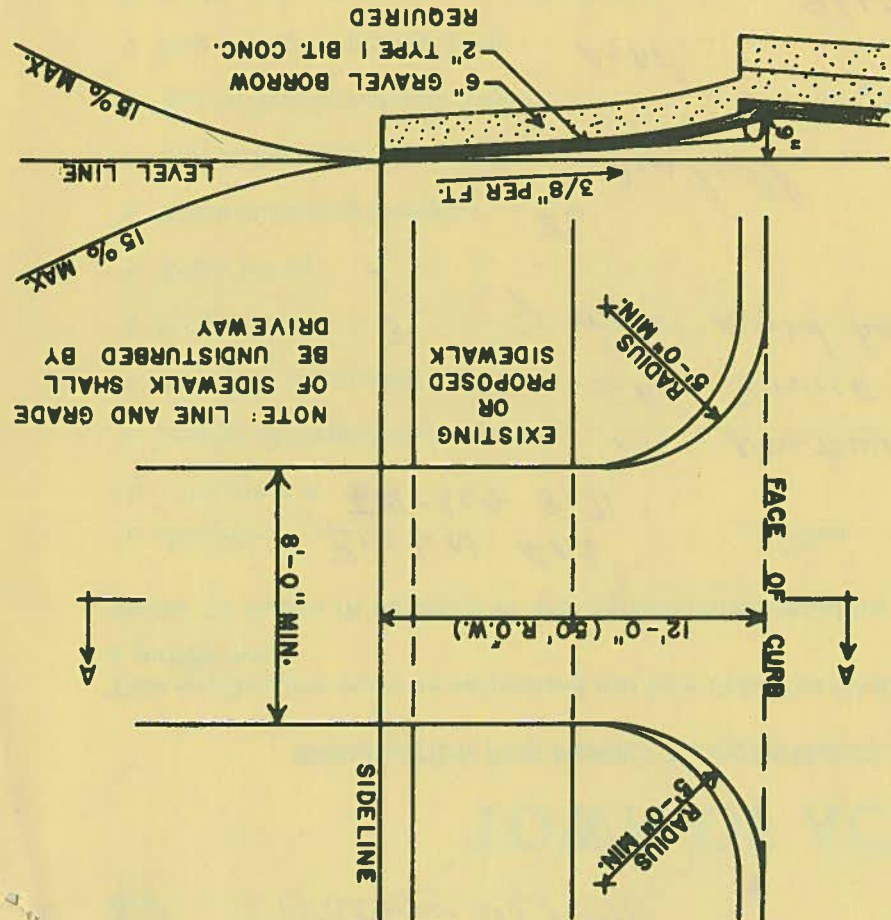
# TOWN OF ACTON TYPICAL DRIVEWAY 8 TRENCH DETAIL FEB. 1969 NO SCALE



NOTE: 1. FINAL PATCH DEPTH  
3" OIL TREATED ROADS  
4" BIT. CONC. ROADS  
2. SEE SPECIFICATIONS FOR  
FURTHER REQUIREMENTS

## SKETCH

### SECTION A-A





Date.....

Permit No.....

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3. Purpose of Construction: .....*NEW GAS SERVICE*.....  
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5. Width of Cut: .....*2'*.....  
6. Width of Existing Pavement: .....*26'*.....  
7. Type of Existing Roadway Surface: .....*Asphalt*..... Type of Curb:.....*—*.....  
8. Type of Existing Sidewalk Surface: .....*—*..... Type of Shoulder: .....*—*.....  
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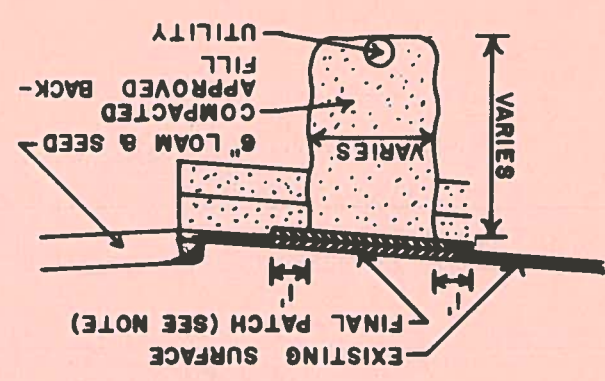
Signature of Applicant.....*Phil Wells*.....

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Application Denied: Date ..... By:.....

Work Inspected and Approved: Date ..... By:.....

# TOWN OF ACTON TRENCH DETAIL FEB. 1969 NO SCALE



NOTE: 1. FINAL PATCH DEPTH  
3\"/>

## SKETCH

### SECTION A-A

